S	CHEDULE B (FEC Form 3)	Use seperate schedule(s)		NUMBER: PAGE 68 / 71
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	yone) 17
An	y Information copied from such Reports and Statem	ents may not be sold or used	by any person f	20a 20b 20c X 21 or the purpose of solicating contributions
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee				
	NAME OF COMMITTEE (In Full) Gallegly for Congress			
۹.	Full Name (Last, First, Middle Initial) JD HAYWORTH FOR CONGRESS			Transaction ID: SB21.17406 Date of Disbursement
	Mailing Address 14300 N. Northsight Blvd. #105			$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} N & N & N \\ 2 & 1 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix} $
		State Zip Code AZ 85260		Amount of Each Disbursement this Period
	Purpose of Disbursement Donation			1000.00 Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	ment For: 2006 Primary X General Other (specify)		
	State: AZ District: 5			
3.	Full Name (Last, First, Middle Initial) John JOHN T. DOOLITTLE FOR CONGRESS			Transaction ID: SB21.17394 Date of Disbursement
	Mailing Address 2150 RIVER PLAZA DR. #150			$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 7 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & Q & G & Y \\ 2 & Q & Q & G & Y \end{bmatrix}$
	•	State Zip Code CA 95833		Amount of Each Disbursement this Period
	Purpose of Disbursement Donation		1000.00 Refund or Disposal of Excess	
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Senate President	ment For: 2006 Primary X General Other (specify) ▼		
	State: CA District: 4 Full Name (Last, First, Middle Initial)			Transaction ID: SB21.17383
Э.	Ron RON LEWIS FOR CONGRESS			Date of Disbursement
	Mailing Address PO Box 307			1 0 M / D 2 B / Y Y Y O O 6 Y
		State Zip Code KY 42702		Amount of Each Disbursement this Period
	Purpose of Disbursement Donation			Refund or Disposal of Excess
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: X House Disburse Senate President State: KY District: 02	ment For: 2006 Primary X General Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)				
TOTAL This Period (last page this line number only)				